Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>07-11-09</u>	Address:	Mckinnies Rd/Benthall Rd	
Case #:	<u>PO</u> 0 <u>9-035D</u>		Mt Vernon Indiana	
County:	Posey		<u>47620</u>	
Type of Laboratory Seizure (check one)		Scizure Location (check all that apply)		
 ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only) 		Residence Outbuilding Vehicle	☐ Hotel/Motel ☑ Open – No Structure ☐ Other;	
Items Found: Location (bedroom, kitchen, open sir, etc) (check all that apply)				
Red Phosphorous/Iodine Reaction(s):				
Flammable Solvents:				
Water Reactive Metal (Lithium):				
Anhydrous Ammonia:				
Hydrochloric Acid Gas Generator(s):				
Corrosive Acid;				
Corrosive Base:				
Other (item and location): Animonium Nitrate and wat				
\cdot				
Yes _ No	er age 18 discovered (check one) (number present) port to Child Protective Services	D Ephedrin	<u>e Information</u> e/Pseudoophodrine Tracking Log erchant Tip —	
This report is to be faxed to the following agencies that serve the location:				
Fire Departs	ment: Marrs	Fax: <u>812-</u> Fax: <u>812-838-856</u> I Fax:		
Health Depa	artment: Poscy County Health Dopt			
Child Protec	ction Service: <u>N/A</u>			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: K. Rose Phone 812-307-0047				

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case life, and a copy sent to the Clandestine Laboratory Team Leader for retention.